								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2003									7945	0	056/0	724-3	
CLAIMS AS FILED - PART I (Column 1) (Column 2)								MALL I	ENTITY	OR		R THAN ENTITY	
TOTAL CLAIMS			55				ſ	RATE	FEE	7	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		8	SASIC FE	E 385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			55 minus 20=		. 35		Ī	XS 9=	3/5	OR	XS18=		
IN	DEPENDENT C	CLAIMS	minus 3 =				Γ	X43=	-	OR	X86=		
ML	JÉTIPLE DEPE	NDENT CLAIM P	RESENT						-	OR	÷290=		
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL	700	OR	TOTAL		
	, c					OTHER	THAN						
	(Column 1) (Column 2) (Column 3)						:	SMALL	ENTITY	OR	SMALL		
AMENDMENT A	45/07	CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
MON	Total	.55	Minus	-5	5	=		XS 9=		OR	XS18=		
AME	Independent	• /	Minus)		X43=		ł	OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPEN			PENDENI	CLAIM		Γ.	+145=		OR	+290=		
							<u></u>	TOTAL			TOTAL		
(Column 1) (Column 2) (Column 3)								DIT. FEE	<u> </u>]	ADDIT. FEE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ST IER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
MO	Total	•	Minus	**				X\$ 9=	_	OR	X\$18=		
ME	Inaependent	•	Minus	***		=	—	X43=			X86=		
^	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						F	N40=		OR	7005		
							L	145=		OR	+290=		
										OR ,	TOTAL ADDIT. FEE		
		(Column 1) (Column 2) (Column 3)										ł	
AMENDMENT C	•	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOL PAID F	ER JSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
ğĮ	Total	•	Minus	**		=	×	\$ 9=		OR	X\$18=		
ME.	Independent		Minus	***		=		(43=		` 	X86=		
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							·40=		OR	~00 =		
 If the entry in column 1 is less than the entry in column 2, write "0" in column 3. 								145= TOTAL		OR	+290=		
** If the *Highest Number Previously Paid For* IN THIS SPACE is less than 20, enter *20.* **If the *Highest Number Previously Paid For* IN THIS SPACE is less than 3, enter *3.*										OR A	TOTAL DDIT. FEE		
Ť	he "Highest Num	ber Previously Paid	For (Total or	Independen	i) is the f	nighest number fo	ound i	n the app	ropriate box	in colu	mn 1.		